

2010 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000003702

Entity Name: ANARKALI BOUTIQUE, INC.

FILED
Apr 29, 2010
Secretary of State

Current Principal Place of Business:

1804 NORTH UNIVERSITY DRIVE
PEMBROKE PINES, FL 33024

New Principal Place of Business:

Current Mailing Address:

1804 NORTH UNIVERSITY DRIVE
PEMBROKE PINES, FL 33024

New Mailing Address:

FEI Number: 65-0972856 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SOHAIL, NIBEELA
1804 N UNIVERSITY DR
HOLLYWOOD, FL 33024 US

Name and Address of New Registered Agent:

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: _____

Electronic Signature of Registered Agent

_____ Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PTD
Name: SOHAIL, NIBEELA R MRS
Address: 10659 NW 2ND CIRCLE
City-St-Zip: PEMBROKE PINES, FL 33026

Title: SVD
Name: SOHAIL, ASIF MR
Address: 10659 NW 2ND CIRCLE
City-St-Zip: PEMBROKE PINES, FL 33026

Title: VP
Name: SOHAIL, HAMZA MR
Address: 10659 NW 2ND CIRCLE
City-St-Zip: PEMBROKE PINES, FL 33026

Title: VP
Name: SOHAIL, HARIS
Address: 10659 NW 2ND CIRCLE
City-St-Zip: PEMBROKE PINES, FL 33026

Title: VPD
Name: SOHAIL, TANIA MS
Address: 10659 NW 2ND CIRCLE
City-St-Zip: PEMBROKE PINES, FL 33026

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: NIBEELA SOHAIL

Electronic Signature of Signing Officer or Director

PTD

04/29/2010

Date